

ROLL CALL

STATEMENT CONCERNING THE ANNUAL NOTICE OF PUBLIC MEETINGS

ANNOUNCEMENTS

The Nomination Committee will be appointed to nominate the slate of officers for the elections to be held at the August meeting.

MINUTES Approval of the June 10, 2015 Open Board Minutes

NEW BUSINESS

A4509 - Seeks to create “Pain-Capable Fetus Protection Act”; which bans abortion 20 weeks or more after fertilization.

The Executive Committee recommended not taking a position on this proposed bill.

A4517 - Seeks to establish civil immunity for damages arising out of birth injury or congenital defect for physicians providing

prenatal care under certain circumstances.

The Executive Committee recommended supporting the bill, however, it recommended that the drafter consider broadening the protections offered to all those health care providers who within their scope of practice provide prenatal care, such as, midwives, physician assistants and advanced practice nurses.

S20 - Seeks to create The “Out-of-network Consumer Protection, Transparency, Cost Containment and Accountability Act.”

While the Executive Committee believed that the goal of this proposed legislation was laudable and the Board has always been a supporter of providing complete and full information to consumers/patients, it did not recommend support of this bill. The Board believed that licensees provide as much information as is available at the time of providing and/or arranging for the provision of medical services. The difficulty in fully complying with the proposal is that in this ever changing area of insurance coverage, it is difficult, if not impossible, to remain current with each and every nuance of coverage. Inasmuch as the insurance provider is the major participant in this process, and the entity with the most current information, it should be the one primary responsible for providing this information to its insureds. The proposal creates an undue burden without the concomitant benefit on physicians who have a difficult time knowing the extent of coverage for their own policies that

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requiring them to know about the coverage of fellow practitioners providing services on behalf of his/her patients is impossible. The Board also questioned whether the Health Price Index was appropriate under the circumstances described in this bill. The ultimate ramification to this bill may not be in the best interest of the patients as while not intended, physicians may just opt out of participation in certain networks, thereby, diminishing the pool of available physicians. Another unintended consequence may be that physicians will not be attracted to come into New Jersey to practice given the extraordinary burdens created by this proposal.

S2876 - Seeks to require certain surgical practices and ambulatory care facilities licensed in this state to be owned by general hospital or medical school located in the State.

The Executive Committee did not favor support of this bill inasmuch as it may not be in the best interest of the patient because it could ultimately lead to fewer choices. The Committee believed there were some benefits to a competitive market place that although not intended could result with the passage of this bill.

S2906 - Seeks to limit payments under health benefits plans to in-network amounts in certain circumstances, prohibits out-of-network health providers from charging carriers more than 150 percent of Medicare rate in certain circumstances.

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The Executive Committee did not recommend support of this proposal. If passed, it may create a problem for hospitals to attract and maintain a group of physicians to provide the “on call” benefits usually provided by the out of network health care “hospitalists.” It is already difficult for hospitals, in particular in the Emergency Department, to attract and be fully staffed. The limitations of the out of network charges will not provide the needed incentive necessary to staff this area.

S2956 - Seeks to establish cap on amount that hospital can charge patients for laboratory services to 150% of Medicare.

The Executive Committee recommended that the Board oppose this bill as using the Medicare Standard was inappropriate as it does not necessarily represent the current market value of services provided. This may also impact the ability to attract qualified, skilled physicians to staff and provide certain services with such a limitation, in particular in those areas where a certain medical expertise and/or skill is required for quality patient care.

S2959 - Seeks to require hospital patient’s medical record to include notation if patient has Alzheimer’s disease and related disorders.

The Executive Committee questioned whether this bill would accomplish its intended purpose. It also thought that it was

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not necessary as most, if not all, of the requirements contemplated under this proposal exist already under the standard already in place for medical record keeping, including the diagnosis and treatment of the patient.

OLD BUSINESS

Nothing Scheduled

INFORMATIONAL

Nothing Provided

PUBLIC COMMENT